

June 26, 2014

Via Electronic Filing

Marlene H. Dortch, Secretary Federal Communications Commission Office of the Secretary 445 12th Street, SW Washington, DC 20554

Re:

WC Docket No. 10-90, WC Docket No. 11-42

2014 ETC Annual Report of Santel Communications Cooperative

Study Area Code 391676

Dear Secretary:

On behalf of Santel Communications Cooperative ("Santel"), we have attached for filing confidential and redacted versions of the FCC Form 481 ETC annual reporting information pursuant to 47 CFR 54.313 and 47 CFR 54.422 of the Commission's rules. Santel seeks confidential treatment under the FCC's Protective Order for the information filed pursuant to Section 54.313(f)(2) of the Commission's regulations¹. Santel also seeks confidential treatment under the Commission's existing confidentiality rules at 47 CFR 0.457 and 47 CFR 0.459 for the information filed pursuant to Section 54.313(a)(1). The redacted version is also being filed this date via the FCC's Electronic Comment Filing System.

Sincerely,

Isl Heath Koth
Telco Consultant
Phone: (605) 995-1832
Fax: (605) 995-1778
Heath.Koth@Vantagepnt.com

Enclosure(s)

CC:

Stacy Buckley, Controller, Santel Communications Cooperative Charles Tyler, Telecommunications Access Policy Division

¹ Connect America Fund et al., WC Docket No. 10-90 et al., Protective Order, DA 12-1857 rel. Nov. 16, 2012 (Protective Order).

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-	Study Area Code	391676				***
<015>	Study Area Name	Santel Communicatio	ons Cooperative			
<020>	Program Year	2015				
<030>	Contact Name: Person USAC should contact with questions about this data	Stacy Buckley				
<035>	Contact Telephone Number: Number of the person identified in data line <030>	6057968105 ext.				
<039>	Contact Email Address: Email of the person identified in data line <030>	sbuckley@santel.net				
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	Service Quality Improvement Reporting		(complete attached worksh	reet)	· /	10.16.16.18.18.18
<200> <210>	Outage Reporting (voice)		(complete attached worksh	eet)		
<300>		outages to report		03	✓	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
<300>	Unfulfilled Service Requests (voice)					
<310>	Detail on Attempts (voice)					18 18 18 18
	2 6 2					
				(attach descriptive de	cument)	
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<320>	Unfulfilled Service Requests (broadband)			1	4	- C. T.
~22N~	Detail on Attempts (broadband)					1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
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<410> <420>	Fixed 0.0 Mobile 0.0				1	/
<430>	AND AND THE CONTRACTOR OF THE	and)				1 10 10 10 10 10 10 10 10 10 10 10 10 10
<440>	Fixed 0.0					8 8 8 8 8 8
<450>	Mobile 0.0					
<500>	Service Quality Standards & Consumer Protection R	ules Compliance	(check to indicate certifica	ition)	1	
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<510>			(attached descriptive de	ocument)	1	1
					差	3) 0 000
]			1
<600>	Functionality in Emergency Situations 3916768D610.pdf		(check to indicate certifica	ition)		
	331070BDG10.Pd1					11 7 7
			(attached descriptive docu	ment)	1]

	with questions about this data	301000						
<035>	Contact Telephone Number: Number of the person identified	in data line <030>	6057968105	ext.				
<039>	Contact Email Address: Email of the person identified in	data line <030>	sbuckley@sar	ntel.net				88
	n de la companya de La companya de la co	*					en en en en en en En en	(2) (1) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2
<100>	Service Quality Improvement Rep	oorting			complete attached works	heet)	(check box whe	
<200>	Outage Reporting (voice)	J			complete attached works			1
<210>	✓	< check box if no	outages to repo					6 4 4 4 4 4 4 6 6 6 6 6 6 6 6 6 6 6 6 6
<300>	Unfulfilled Service Requests (voi	ce) 0				ĺ		******
<310>	Detail on Attempts (voice)						1	CAR CAR STATE
	Į					(attach descriptive	document)	
<320>	Unfulfilled Service Requests (broa	adband) o					✓	ELLE SELE
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<330>	Detail on Attempts (broadband)					(attach descriptive	document)	1.6 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.
<400>	Number of Complaints per 1,000	customers (voice)				_		
<410>	Fixed	0.0					/	· / ·
<420>	Mobile	0.0						
<430> <440>	Number of Complaints per 1,000 Fixed	o.o (broadb	and)				1	Sale Sale Sale Sale Sale Sale Sale Sale
<450>	Mobile	0.0					_	
<500>	Service Quality Standards & Con	sumer Protection Ru	ıles Complian	ce	(check to indicate certific	ation)	1	□ ✓
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<510>					(attached descriptive d	ocument)	✓	✓
<600>	Functionality in Emergency Situa 391676SD610.pdf	tions			(check to indicate certific	ation)		_
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<610>								
	Company Price Offerings (voice)	7 844	****		(complete attached works	heet)		
	Company Price Offerings (broad)				(complete attoched works	theet)		47411
	Operating Companies and Affilia Tribal Land Offerings (Y/N)?	es O O			(complete attached works complete attached works	5.0	 	F F F F F F F
	Voice Services Rate Comparabilit			(I) yes,	complete attached works (check to indicate certific		/	A STAN STAN
	391676sd1010.pdf			ì				
<1010>	ş:				(attach descriptive docur	nent)	1	1818 188
<1100>	Terrestrial Backhaul (Y/N)?	00		(if no	t, check to indicate certific	ration)	· ·	
<1110>					(complete etter-1 1	chant)		13 18 18 18 18 18
	Terms and Condition for Lifeline	Customers			(complete attached work (complete attached work			-
	CP1000 300 001 001 00 00	ice Cap Additional D	Ocumentatio	n Workshe	eet			
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<1200>	Price Cap Carriers, Proceed to Pr Including Rate-of-Return Carrie	rs affiliated with Prid	ce Cap Local E	manata nontra 160 - 506	resource observation and that the CONTRACT	5		management of the control of the con
<1200> <2000>		rs affiliated with Pric	ce Cap Local E		(check to indicate certifica (complete attached works			8 4 6 2 2 2 2
<1200>	Including Rate-of-Return Carrie			#####################################	(complete attached works			1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
<1200> <2000>				on Worksh	(complete attached works	heet)	/	
<1200> <2000> <2005>	Including Rate-of-Return Carrie			on Worksh	(complete attached works eet	heet) ntion)	✓ ✓	

<010> <015>			OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
-01E>	Study Area Code	391676	
<012>	Study Area Name	Santel Communications Cooperative	9
<020>	Program Year	2015	*
<030>	Contact Name - Person USAC should contact regarding this data	Stacy Buckley	
<035>	Contact Telephone Number - Number of person identified in data line <030>	6057968105 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	sbuckley@santel.net	
<110>	Has your company received its ETC certification from the FCC?	(yes / no) O	
<111>	If your answer to Line <110> is yes, do you have an existing §54.202(a) "5 year plan" filed with the FCC?	(yes / no) O O	
11112	year plan med with the ree.	(700) 1107	
<112>	If your answer to Line <111> is yes, then you are required to file a progress report, on line <112> delineating the status of your company's existing § 54.202(a) "5 year plan" on file with the FCC, as it relates to your provision of voice telephony service. Attach Five-Year Service Quality Improvement Plan or, in subsequent years, your annual progress report filed pursuant to 47 C.F.R. § 54.313(a)(1). If your c CETC which only receives frozen support, your progress report is only required to address voice telephony service.	391676SD112.pdf ompany is a	
	Please check these boxes below to confirm that the attached documents(s), on lit 112, contains a progress report on its five-year service quality improvement plan pursuant to § 54.202(a). The information shall be submitted at the wire center level or census block as appropriate.	ne .	Name of Attached Document
<113>	Maps detailing progress towards meeting plan targets		
<114>	Report how much universal service (USF) support was received		
<115>	How (USF) was used to improve service quality		
<116>	How (USF)was used to improve service coverage		
<117>	How (USF) was used to improve service capacity		
<118>	Provide an explanation of network improvement targets not met in the prior calendar year.		

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-	<a>>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<c1></c1>	<c2></c2>	<d></d>	<e></e>	<f></f>	<g></g>	<h></h>
	NORS Reference Number	Outage Start Date	Outage Start Time	Outage End Date	Outage End Time	Number of Customers Affected	Total Number of Customers	911 Facilities Affected (Yes / No)	Service Outage Description (Check all that apply)	Did This Outage Affect Multiple Study Areas (Yes / No)	Service Outage Resolution	Preventative Procedures
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<020>	Program Year	2015
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<039>	Contact Email Address - Email Address of person identified in data line <030>	sbuckley@santel.net
	9	
<701>	Residential Local Service Charge Effective Date 1/1/2014	
<702>	Single State-wide Residential Local Service Charge	

2.11	- 122 - 194		5.02		363	~ 100		:
				Residential Local			Mandatory Extended Area	
State	Exchange (ILEC)	SAC (CETC)	Rate Type	Service Rate	State Subscriber Line Charge	State Universal Service Fee	Service Charge	Total per line Rates and I
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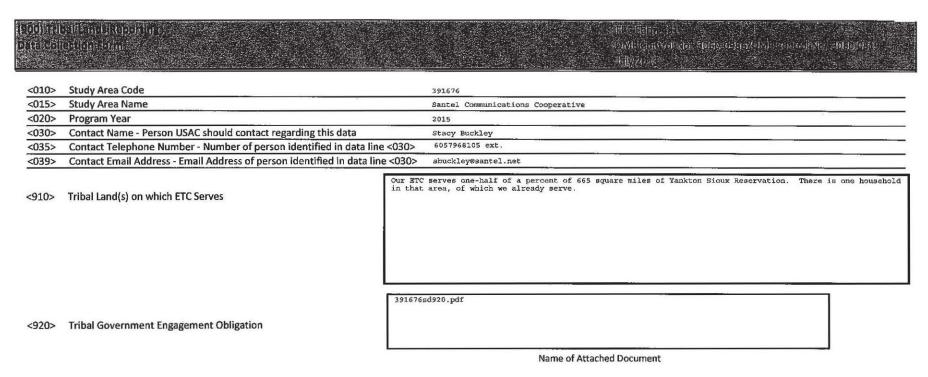
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<039>	Contact Email Address - Email Address of person identified in data line <030>	sbuckley@santel.net

<711>		i dik	<u> 15. (158</u>)	96		Silver .	472	TELL	
	State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rate and Fees	Broadband Service - Download Speed (Mbps)	Broadband Service - Upload Speed (Mbps)	Usage Allowance (GB)	Usage Allowance Action Taken When Limit Reached (select
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				- See attac	hed				
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<010>	Study Area Code		391676
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<039>	Contact Email Address -	Email Address of person identified in data line <030>	sbuckley@santel.net
<810>	Reporting Carrier	Santel Communications Cooperative	
<811>	Holding Company	N/A	
<812>	Operating Company	N/A	

<813>			\$60.0
	Affiliates	SAC	Doing Business As Company or Brand Designation
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If your company serves Tribal lands, please select (Yes,No, NA) for each these boxes to confirm the status described on the attached document(s), on line 920, demonstrates coordination with the Tribal government pursuant to § 54.313(a)(9) includes:

<921> Needs assessment and deployment planning with a focus on Tribal community anchor institutions.
<922> Feasibility and sustainability planning;
<923> Marketing services in a culturally sensitive manner;
<924> Compliance with Rights of way processes
<925> Compliance with Land Use permitting requirements
<926> Compliance with Facilities Siting rules
<927> Compliance with Environmental Review processes
<928> Compliance with Cultural Preservation review processes
<929> Compliance with Tribal Business and Licensing requirements.

Select (Yes,No,
NA)
NA Partie
NA
NA
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NA
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NA

<015> Study Area Name <020> Program Year <030> Contact Name - Person USAC should contact it <035> Contact Telephone Number - Number of pers <039> Contact Email Address - Email Address of pers Please check this box to confirm no terrestria <1120> options exist within the supported area pursu	on identified in data line <030> son identified in data line <030>	Santel Communications Cooperative 2015 Stacy Buckley 6057968105 ext. sbuckley@santel.net
2030> Contact Name - Person USAC should contact to 2035> Contact Telephone Number - Number of person 2039> Contact Email Address - Email Address of person 2039> Please check this box to confirm no terrestria	on identified in data line <030> son identified in data line <030>	Stacy Buckley 6057968105 ext.
2035> Contact Telephone Number - Number of pers 2039> Contact Email Address - Email Address of pers 2039> Please check this box to confirm no terrestria	on identified in data line <030> son identified in data line <030>	6057968105 ext.
2039> Contact Email Address - Email Address of pers Please check this box to confirm no terrestria	son identified in data line <030>	
Please check this box to confirm no terrestria		sbuckley@santel.net
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	The part of the pa	
Please check this box to confirm the reporting broadband service of at least 1 Mbps downst upstream within the supported area pursuant	ream and 256 kbps	

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<010>	Study Area Code		391676
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<039>	Contact Email Address - Email Address of person identified in data line	<030	> sbuckley@santel.net
<1210>	Terms & Conditions of Voice Telephony Lifeline Plans		391676SD1210.pdf
			Name of Attached Document
<1220>	Link to Public Website	ПТР_	www.santel.net/support/lifeline
or the we	Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers, Details on the number of minutes provided as part of the plan,), V	

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<039>	Contact Email Address - Email Address of person identified in data line <030>	sbuckley@santel.net			
CHECK th	be boxes below to note compliance as a recipient of Incremental Connect Ameri support as set forth in 47 CFR § 54.313(b),(c),(d),(d)				d Connect America Phase II
	Incremental Connect America Phase I reporting				8
<2010>	2nd Year Certification (47 CFR § 54.313(b)(1))				
<2011>	3rd Year Certification (47 CFR § 54.313(b)(2))		=		
120117	Sid real certification (47 Crit § 54.515(b)(2))				
	Price Cap Carrier Receiving Frozen Support Certification (47 CFR § 54.312(a))				
<2012>	2013 Frozen Support Certification				
<2013>	2014 Frozen Support Certification				
<2014>	2015 Frozen Support Certification				
<2015>	2016 and future Frozen Support Certification				
<2016>	Price Cap Carrier Connect America ICC Support {47 CFR § 54.313{d}} Certification Support Used to Build Broadband				
	Connect America Phase II Reporting {47 CFR § 54.313(e)}				
<2017>	3rd year Broadband Service Certification				
<2018>	5th year Broadband Service Certification				
<2019>	Interim Progress Certification				
<2020>	Please check the box to confirm that the attached document(s), on I pursuant to § 54.313 (e)(3)(ii), as a recipient of CAF Phase II support addresses of community anchor institutions to which began providing receding calendar year.	ine 2021, contains the required inforn shall provide the number, names, and g access to broadband service in the	mation d		
<2021>	Interim Progress Community Anchor Institutions	Na	me of Attached Documen	nt Listing Required Information	
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		ellizade .	
<010>	Study Area Code	201676	
<015>	Study Area Name	391676 Santel Communications Cooperative	
<020>	Program Year	2015	=
<030>	Contact Name - Person USAC should contact regarding this data Contact Telephone Number - Number of person identified in data line <030>	Stacy Buckley 6057968105 ext.	_
<039>	Contact Email Address - Email Address of person identified in data line <030>	sbuckley@santel.net	
CHECK t	ne boxes below to note compliance on its five year service quality plan (pursuant	to 47 CFR § 54.202(a)) and, for privately held carriers, ensuring compliance with the financial reporting regulrements set forth in	147
	CFR § 54.313(f)(2). I further certify that the	e information reported on this form and in the documents attached below is accurate.	
	*		
(3010)	Progress Report on 5 Year Plan		
/	Milestone Certification (47 CFR § 54.313(f)(1)(i))		
		Name of Attached Document Listing Required Information	
(3011)	Please check this box to confirm that the attached document(s), on line 30 § 54.313 (f)(1)(ii), the carrier shall provide the number, names, and addres providing access to broadband service in the preceding calendar year.		
(3012)	Community Anchor Institutions (47 CFR § 54.313(f)(1)(ii))	,	
		Name of Attached Document Listing Required Information	
(3013)	Is your company a Privately Held ROR Carrier [47 CFR § 54.313(f){2)}	(Yes/No)	
(3014)	If yes, does your company file the RUS annual report	(Yes/No) LOO	
		, contains the required information pursuant to § 54.313(f)(2) compliance requires:	
(3015)	Electronic copy of their annual RUS reports (Operating Report for Telecommunications Borrowers)	Ų ∠ I	
(3016)	Document(s) for Balance Sheet, Income Statement and Statement of Cas	h Flows	
		391676SD3017.pdf	
(3017)	If the response is yes on line 3014, attach your company's RUS annual		
	report and all required documentation		
		Name of Attached Document Listing Required Information	
(3018)	If the response is no on line 3014, is your company audited?	(Yes/No)	
8000000	If the response is yes on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § $54.313(f)(2)$, contains		
(3019)	Either a copy of their audited financial statement; or (2) a financial report in a for	rmat comparable to RUS Operating Report for Telecommunications	
(3020)	Document(s) for Balance Sheet, Income Statement and Statement of Ca	ish Flows	
(3021)	Management letter issued by the independent certified public accountant that p	performed the company's financial audit.	
	If the response is no on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains:		
(3022)	Copy of their financial statement which has been subject to review by an		
	independent certified public accountant; or 2) a financial report in a	-	
	format comparable to RUS Operating Report for Telecommunications Borrowers,		
(3023)	Underlying information subjected to a review by an Independent certified	<u></u>	
(3024)	public accountant Underlying information subjected to an officer certification.	⊢	
	Document(s) for Balance Sheet, Income Statement and Statement of Car	sh Flows	
	Vo. 0.		
(3026)	Attach the worksheet listing required information		
3- /)			
	L		
		Name of Attached Document Listing Required Information	

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TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

I certify that I am an officer of the reporting carrier; my responsibl reciplents; and, to the best of my knowledge, the information rep	lities include ensuring the accuracy of the annual reporting requirements for universal service support orted on this form and in any attachments is accurate.
Name of Reporting Carrier: Santel Communications Cooper	ative
Signature of Authorized Officer: CERTIFIED ONLINE	Date 6/13/2014
Printed name of Authorized Officer: Stacy Buckley	
Title or position of Authorized Officer: Controller	
Telephone number of Authorized Officer: 6057968105 ext.	
Study Area Code of Reporting Carrier: 391676	Filing Due Date for this form: 07/01/2014

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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

I certify that (Name of Agent)	is authorized to submit the information reported on behalf of the reporting carrier. I
also certify that I am an officer of the reporting carrier; my agent; and, to the best of my knowledge, the reports and o	responsibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized ata provided to the authorized agent is accurate.
Name of Authorized Agent:	
Name of Reporting Carrier;	
Signature of Authorized Officer:	Date:
Printed name of Authorized Officer:	
Title or position of Authorized Officer:	
Telephone number of Authorized Officer:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:

TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent A	norized to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier	
	d to submit the annual reports for universal service support reciplents on behalf of the reporting carrier; I ting carrier; and, to the best of my knowledge, the information reported herein is accurate.	nave provided
Name of Reporting Carrier:		
Name of Authorized Agent or Employee of Agent:		
ilgnature of Authorized Agent or Employee of Agent:	Date:	107-2
rinted name of Authorized Agent or Employee of Agent:		
itle or position of Authorized Agent or Employee of Agent		
elephone number of Authorized Agent or Employee of Ager		
tudy Area Code of Reporting Carrier:	Filing Due Date for this form:	

Attachments

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E		mte266
<010>	Study Area Code	391676
<015>	Study Area Name	Santel Communications Cooperative
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Stacy Buckley
<035>	Contact Telephone Number - Number of person identified in data line <030>	6057968105 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	sbuckley@santel.net
<701>	Residential Local Service Charge Effective Date 1/1/2014	
<702>	Single State-wide Residential Local Service Charge	

<703>

				Residential Local	64 : 01		Mandatory Extended Area	
State	Exchange (ILEC)	SAC (CETC)	Rate Type	Service Rate	State Subscriber Line Charge	State Universal Service Fee	Service Charge	Total per line Rates and Fee
SD	Wolsey		FR	16.5	0.0	0.0	2.0	18.5
SD	Ethan		FR	16.5	0.0	0.0	0.0	16.5
SD	Alpena		FR	16.5	0.0	0.0	0.0	16.5
SD	Artesian		FR	16.5	0.0	0.0	0.0	16.5
SD	Forestburg		FR	16.5	0.0	0.0	0.0	16.5
SD	Parkston		FR	16.5	0.0	0.0	0.0	16.5
SD	Tripp		FR	16,5	0.0	0.0	0.0	16.5
SD	Mount Vernon	77 65.00	FR	16.5	0.0	0.0	0.0	16.5
SD	Letcher		FR	16.5	0.0	0.0	0.0	16.5
SD	Woonsocket	2000	FR	16.5	0.0	0.0	0.0	16.5
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<010>	Study Area Code	391676
<015>	Study Area Name	Santel Communications Cooperative
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Stacy Buckley
<035>	Contact Telephone Number - Number of person identified in data line <030>	6057968105 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	sbuckley@santel.net

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T jik	j - j	100	1400	ale view alek	i sa	(r)	- 1.5	100
State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rates and Fees		Broadband Service -Upload Speed (Mbps)	Usage Allowance (GB)	Usage Allowance Action Taken When Limit Reached (select)
SD	Wolsey	35.95	0.0	35.95	5.0	1.0	100.0	Other, Unlimited Usage Allowance
SD	Ethan	35.95	0.0	35.95	5.0	1.0	100.0	Other, Unlimited Usage Allowance
SD	Alpena	35.95	0.0	35.95	5.0	1.0	100.0	Other, Unlimited Usage Allowance
SD	Artesian	35.95	0.0	35.95	5.0	1.0	100.0	Other, Unlimited Usage Allowance
SD	Forestburg	35.95	0.0	35.95	5.0	1.0	100.0	Other, Unlimited Usage Allowance
SD	Parkston	35.95	0.0	35.95	5.0	1.0	100.0	Other, Unlimited Usage Allowance
SD	Tripp	35.95	0.0	35.95	5.0	1.0	100.0	Other, Unlimited Usage Allowance
SD	Mount Vernon	35.95	0.0	35.95	5.0	1.0	100.0	Other, Unlimited Usage Allowance
SD	Letcher	35.95	0.0	35.95	5.0	1.0	100.0	Other, Unlimited Usage Allowance
SD	Woonsocket	35.95	0.0	35.95	5.0	1.0	100.0	Other, Unlimited Usage Allowance
				×				

SANTEL COMMUNICATIONS COOPERATIVE (SAC 391676) ATTACHMENT – LINE 112

ATTACHMENT REDACTED IN ENTIRETY

CERTIFICATION OF SANTEL COMMUNICATIONS

Reporting Period January 1 – December 31, 2013

Sec. 54.313(a) (5) Service Quality Standards and Consumer Protection Rules Compliance

Pursuant to § 54.313(a) (5) for High-cost Recipients, Santel Communications Cooperative, Inc.

hereby certifies that it is in compliance with applicable service quality standards and consumer

protection rules. Santel follows Customer Proprietary Network Information (CPNI) rules and

also files the annual CPNI certification with the FCC pursuant to the FCC's current CPNI rules

and regulations. Attached are annual notices to customers on matters related to customer

privacy. Santel has also implemented an Identity Theft Prevention Program in accordance with

the federal Red Flags Rule.

I verify that the foregoing is true and correct. Executed on this May 21, 2014.

Pamela Kopfmann, Customer Service Manager

Pamela Kopfmann

Santel Communications Cooperative, Inc.

Statement of Non-Disconnination



SANTEL COMMUNICATIONS STATEMENT OF NON-DISCRIMINATION

Santel Communications Cooperative, Inc. is the recipient of Federal financial assistance from the U.S. Department of Agriculture (USDA). The USDA prohibits discrimination in all its programs and activities on the basis of race, color, national origin, age, disability, and where applicable, sex, marital status, familial status, parental status, religion, sexual orientation, genetic information, political beliefs, reprisal, or because all or part of an individual's income is derived from any public assistance program. (Not all prohibited bases apply to all programs.) Persons with disabilities who require alternative means for communications of program information (Braille, large print, audiotape, etc.) should contact USDA's TARGET Center at (202) 720-2600 (voice and TDD).

The person responsible for coordinating this organization's nondiscrimination compliance efforts is Ryan Thompson, Santel Communications Cooperative's General Manager. To file a complaint of discrimination, write to USDA, Director, Office of Civil Rights, 1400 Independence Avenue S.W., Washington, D.C. 20250-9410, or call toll free (866) 632-9992 (voice) or (800) 877-8339 (TDD) or (866) 377-8642 (relay voice users). USDA is an equal opportunity provider and employer.

Your Rights Billing Rame and And

The FCC requires our company, under certain circumstances, to release the Billing Name and Address (BNA) of our telephone customers to other telecommunications providers. The main reason for releasing BNA information is to ensure proper billing for certain types of calls. For instance, calls such as collect, third-number billed, or calling card calls may be carried by a long distance carrier who is not your chosen carrier. Under those circumstances, the carrier does not know who to bill the call to, and therefore, must request the BNA from our company in order to bill the call. We must provide the information to the requesting carrier.

BNA can also be released to telecommunications providers for other reasons, such as verification for presubscription, servicing your account, to prevent fraud, or when you move from one location to another. If you have an unlisted or non-published telephone number, you have a choice. If you do not want your BNA released by our company for third-party billed calls, collect calls and calling card calls, we need affirmative notifications from you within 30 days. If you provide us with such notification, your ability to make calling card calls or to receive collect calls or third-number billed calls may be denied. Should you have any questions regarding this matter, please call our business office at 777.

Santel Communications respects your privacy and observes the privacy rules established by the Federal Communications Commission, the South Dakota Public Utilities Commission and the telecom oversight agencies.

Santel Communications will never sell your account information or provide details of your telephone calls to other parties, unless required by law enforcement.

From time to time, we would like to notify you of additional products available from us outside the existing business relationship we have with you. However, if you prefer to be excluded from these promotional efforts, please complete and sign this card on the reverse side and return it. We will screen you from all targeted marketing programs.

Your Santel Communications service is not impacted by this notification.

Please do not hesitate to call our office at 777 with any questions.

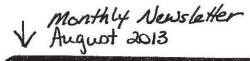
Thank you for being a Santel Communications customer.



I have read this notice and the explanation on the reverse side. I prefer to OPT OUT of Santel Communications' marketing of products and services outside of my existing scope of service.

I understand that by opting out, I will NO longer receive direct notification of special offers, services, and campaigns offered by Santel Communications. This Opt-Out will remain in effect for two (2) years.

Name:	Telephone Number:			
Billing Address:				
Signature:	Date:			



Privacy Issues and Your Account

Account number or telephone number

Signature of account owner

I hereby authorize the following person(s) to be added as <u>authorized contacts</u> on my account. I understand that authorized persons can inquire about the bill, make changes to the account and add or disconnect services.

I hereby authorize the following person to be added as <u>loint Owner</u> of my account. I understand that joint owners become equally liable for the balance of the account and are entitled to capital credits earned. (Please return to Santel.)

Name and Social Security Number

Customer Propriety Network Information (CPNI) laws have changed the way Santel addresses the privacy of Santel accounts. Because of this, we have encouraged customers in the past to add one or more additional names to the billing account. Only those listed are allowed to make any changes or ask any questions about the account.

When additional names are added, customers should specify if those named are to be considered joint owners of the account or simply authorized. Sickness, accidents and death can happen unexpectedly and to move, change or disconnect services, the caller must be authorized on the account. In the event of death, a joint owner is eligible to request payout of the capital credits. If there is no joint owner on the account, Letters of Personal Representative or Letters of Authorization for the estate of the deceased will be required.

V Monthly Newsletter Feb 2013

Plan Ahead - Add a Second Name to Your Account

If someone's name is not on an account with Santel Communications, we cannot, by law, give that person information on the account or talk to him or her about the account.

An accident or illness can suddenly leave a person unable to care for his own affairs. If a family member would want to know how much you owe on your bill, we can not give that information. The person could make a payment, but can't be told how much is owed.

It is important for all our customers to plan ahead and have an additional authorized person on their account.

Please check your account by calling our office. Simply dial 777 or 1-888-978-7777 from outside the exchange area. We will tell you whose name is on your account. Please consider adding your spouse, parent, child or anyone else who may need to take action on your personal affairs.

Remember that Santel is a cooperative and we do issue capital credits. Upon the death of our customers, capital credits will be issued once paper work is completed and the estate receives Board approval. Surviving heirs who are not joint owners of the account will need to provide letters of authorization or letters of personal representation. Power of Attorney is not acceptable as it expires upon death.

Form 481

Line 610

Santel Communications operates 10 central offices all of which have a standby generator in the event the location loses commercial power. Each office also has a battery system that can sustain up to 8 hours of no power commercially or via a generator. Santel's networks have redundant paths an no single facility damage will take our network offline. We have spare capacity on our networks and can handle moderate traffic fluctuations.

Mark Operations Maraser 5+27-14



November 2, 2012

Mr. Thurman Cournoyer, Chairman Yankton Sioux Tribal Council P.O. Box 1153 Wagner, SD 57380-1153

Dear Chairman Cournoyer:

I serve as the General Manager of Santel Communications Cooperative ("Santel"), a rural telephone company serving parts of southeastern South Dakota. Our cooperative's service area includes the local exchange of Tripp and it is my understanding that approximately 3.5 miles of land in the southwestern corner of this exchange may be located within the official boundaries of the Yankton Sioux Reservation. This land sits within Charles-Mix County and, presently, includes only one customer residence. The existing customer, to my knowledge, is not a Yankton Sioux Tribal member. This customer also does not currently subscribe to any Santel broadband service, but broadband services can be made available if requested.

This letter is sent to you because the Federal Communications Commission (FCC), as part of a recent Order reforming the federal universal service mechanisms related to telecommunications and information services, has adopted new requirements that are intended to facilitate engagement between telecommunications companies serving Tribal Lands. The FCC's new "Tribal Engagement" provisions are intended to improve communications and foster a greater understanding between service providers and Tribal entities of the factors necessary to deploy and sustain telecommunication services on Tribal lands. The ultimate aim is to benefit Tribal government leaders, carriers/service providers, and consumers living on Tribal lands by providing greater connectivity to 21st century economic opportunities, education, health care, and public safety. See FCC Public Notice, Office of Native Affairs and Policy, Wireless Telecommunications Bureau, and Wireline Competition Bureau Issue Further Guidance on Tribal Engagement Obligation Provisions of the Connect America Fund, DA 12-1165, released July 19, 2012.

There are some questions as to whether these FCC rules related to Tribal Engagement (which also still await approval by the federal Office of Management and Budget (OMB)) are applicable in these circumstances given the small area of land involved and lack of any residing Tribal member customers, but Santel feels compelled at this time to at least request of the Yankton Sioux Tribe whether it is interested in meeting pursuant to the FCC's new Tribal Engagement provisions. If the Tribe is interested, Santel would offer to meet and would like to do so very soon, hopefully, by no later than the end of this November. The purpose of this



meeting would be to, generally, exchange information related to the deployment and provisioning of communications services on any Yankton Sioux Tribal lands that are located within the Tripp exchange area.

If a meeting between Santel and the Yankton Sioux Tribe is held, it is important that at least some of the individuals attending the meeting are "decision-makers." As noted in the FCC's July 19th Public Notice providing further guidance, "engagement cannot be merely between sales and marketing individuals on one side and administrative staff or advisors on the other. The perspectives on needs, expectations, priorities, and abilities that would formulate meaningful exchange often can come only from those with the requisite authority to make decisions."

In closing, if your Tribe would like to proceed with Tribal Engagement in accord with the pending FCC rules, we ask at this time that you respond with the name and contact information for a Tribal representative who could assist in scheduling and arranging a meeting between Santel and the appropriate Tribal government staff and leaders. This information may be provided to me calling (605) 796-8143, or by sending me an e-mail at rthompson@santel.net.

I thank you greatly for your cooperation in this matter.

Sincerely,

Ryan Thompson

Notes:

- delivery receipt confirmed
- as of 60 days later, no response from tribe desiring meeting/discussion
- our exchange area 3.5 miles, of reservation 665 sq miles = 0.005

Redacted for Public Inspection

CERTIFICATION OF SANTEL COMMUNICATIONS

Sec. 54.313(a) (10) Voice Services Rate Comparability

Pursuant to § 54.313(a) (10), Santel Communications Cooperative, Inc. hereby certifies that our prices for fixed voice services are in compliance. We do not have a state SLC and our rates are not more than the applicable national average urban rate as published March 2014 by the Wireline Competition Bureau.

I verify that the foregoing is true and correct. Executed on this May 27, 2014.

there in hyporium

Pamela Kopfmann, Customer Service Manager

Santel Communications Cooperative, Inc.

Redacted for Public Inspection

SANTEL COMMUNICATIONS COOPERATIVE LIFELINE APPLICATION

(Please print)

Name:					
(Last)	(First)	(Mid	dle Initial)	(Date of B	irth)
Service Address:			·		
(S	Street)	(City)	(State)	(Zip)	
Billing Address:					
(If different from service address)		(City)	(State)	(Zip)	
	21			***************************************	
Last 4 digits Social Security	y Number:	Santel 7	Telephone Num	ber: () _	
Alternate Phone where yo	ou can be reached o	r receive messa	ges: ()		_
\$1a.b		. Jakkin	. 111		2 V N-
Number of individuals in a	pplicant nousenolo	: is this	address a perm	anent address	f Y NO
Are you currently receiving	g Lifeline assistance	through any ot	her telephone p	provider? Yes	s No
Please answer the following	ng questions (check	appropriate line	es):		
1. I am applying for:	Lifeline monthly	telephone servi	ice discount (\$9	.25/month tel	ephone discount)
	Toll Limitation Se	rvice (free toll b	olocking or toll o	control)	
2 My household myself	or and ar mara of a	nu donandante	aurenth partie	inator in one	or more of the following
My household, myself, programs: (Check all that a		ny dependents,	currently partic	ipates in one o	or more or the following
ProBramas (encon an inac	·PP·97				
Medicaid (e	g Title XIX/Medical,	, State Supplem	ental Assistance	e)	
*** **********************************	tal Nutrition Assista	and the state of t	NAP) – formerly	Food Stamps	
	tal Security Income				
	olic Housing Assistan		82		
	e Home Energy Assi:		•		
Temporary	Assistance for Need	ly Families (TAN	IF)		
	meeting income qua		ds)		•
National Sci	hool Lunch Free Lun	nch Program			
OR My household income is at or below 135% of the Federal Poverty Guidelines					
If you do not participate in one or more of the programs listed above, you may qualify for Lifeline if your					
household income does not exceed 135% of the Federal Poverty Guidelines (see table below). You must provide					
proof of your household income to verify your eligibility.					
2014 Federal Poverty Guidelines – 135%					
Household	Size	SD Annual	SD N	Aonthly	11. Lang distance
1		\$15,755	\$1,3	12.92	Note. Lang the
2		\$21,236		69.67	toll rates are
3		\$26,717		26.42	Note: Long distance toll rates are the same for both lifeline and nonlifeline
4		\$32,198	\$2,6	83.17	lifeline and nonlifeline
5		\$37,679		39.92	customers.
6		\$43,160		96.67	Cus 10.10-1
7		\$48,641		53.42	
8	10.10	\$54,122	70 mm.	10.17	
For each additional person, ac	bb	\$ 5,481	\$ 4	56.75	1

Redacted for Public Inspection

Important Information:

You will be required to provide documentation showing eligibility.

Lifeline is a federal government assistance benefit and willfully making false statements to obtain the benefit can result in fines, imprisonment, de-enrollment, or being barred from the program.

Only one Lifeline service is available per household. A household is defined, for the purposes of the Lifeline program, as any individual or group of individuals who live together at the same address as one economic unit. An "economic unit" consists of all adult individuals contributing to and sharing in the income and expenses of a household. A household may include related and unrelated persons. A household is not permitted to receive Lifeline benefits from multiple providers. Violation of the one-per-household limitation constitutes a violation of the Federal Communications Commission's rules and will result in your de-enrollment from the program. Lifeline is a non-transferable benefit and you may not transfer your benefit to any other person.

I certify, under penalty of perjury, that:

- (1) I meet the income-based or program-based eligibility criteria for receiving Lifeline, provided in 47 C.F.R. § 54.409. I have provided documentation of eligibility.
- (2) I will notify the carrier within 30 days if, for any reason, I no longer satisfy the criteria for receiving Lifeline including, as relevant, if I no longer meet the income-based or program-based criteria for receiving Lifeline support, I am receiving more than one Lifeline benefit, or another member of my household is receiving a Lifeline benefit;
- (3) If I move to a new address, I will provide that new address to the telephone company within 30 days;
- (4) If I provided a temporary residential address to the telephone company, I will be required to verify my temporary residential address every 90 days;
- (5) My household will receive only one Lifeline service and, to the best of my knowledge, my household is not already receiving a Lifeline service;
- (6) The individual named on the documentation provided demonstrating program-based eligibility, if not me, is part of my household.
- (7) I acknowledge that I may be required to re-certify my continued eligibility for Lifeline at any time, and my failure to re-certify as to my continued eligibility will result in de-enrollment and the termination of my Lifeline benefits pursuant to 47 C.F.R. § 54.405(e)(4);
- (8) I acknowledge and consent that Santel will transmit my above account data to the federal administrator of the National Lifeline Accountability Database to ensure proper administration of the Lifeline program.
- (9) I acknowledge that providing false or fraudulent information to receive Lifeline benefits is punishable by law; and
- (10) The information contained in this application and certification form is true and correct to the best of my knowledge.

		ĺ
Signature	Date	

2014 Estimated Income Requirements for a Household at or Below 135% of the Federal Poverty Guidelines

Persons in Family Unit	Annual Family Income
1	\$15,755
2	\$21,236
3	\$26,717
4	\$32,198
5	\$37,679
6	\$43,160
7	\$48,641
8	\$54,122

For each additional person, add \$5,481.

Consumers may qualify for Lifeline if they participate in any of the programs listed on the previous page, or have a household income that is at or below 135% of the federal poverty guidelines.

To learn more, visit:

www.usac.org www.lifelinesupport.org



Telephone Support



Call: 777; 1-888-978-7777; or email: info@santel net:

Santel Communications is an equal opportunity provider and employer.





Lifeline provides
discounts to
eligible low-income
consumers to help them
establish and maintain
telephone service.

Note:

Telecommunications
carriers do not charge a
Lifeline customer Federal
Universal Service Charge
(FUSC) fees on the
local service portion of
their telephone bill.

Redacted for Public Inspection

What type of discounts are available?

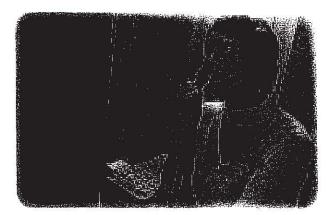
There are two discounts available.

Lifeline assistance lowers the cost of basic, monthly local telephone service. Eligible con-

sumers can receive up to \$9.25 per month in discounts.

How do I apply to receive the Lifeline support discount?

To apply for the Lifeline discount, or if you have any questions, please contact our billing office by dialing 777 from your home phone or 1-888-978-7777 from outside our service area.



Are there any restrictions?

Lifeline can only be used for the main telephone line in a household.

Lifeline customers may purchase all services offered to non-Lifeline customers.

The name on your phone bill must match the name of the participant who is eligible for the program.

How do I know if I qualify?

Eligibility for Lifeline support varies by state. In states that do not provide state support, such as South Dakota, the federal guidelines are used. An individual is eligible if he or she participates in one of the following programs:

- Low-Income Home Energy Assistance Program (LIHEAP)
- Federal Public Housing Assistance or Section 8
- Medicaid
- Supplemental Nutrition Assistance Program (SNAP) (Formerly Food Stamps)
- Supplemental Security Income (SSI)
- Temporary Assistance for Needy Families (TANF)
- National School Lunch Free Lunch Program

In addition, a consumer may be eligible if his or her household income is at or below 135% of the federal poverty guidelines which are on the reverse side.



SANTEL COMMUNICATIONS COOPERATIVE (SAC 391676) ATTACHMENT – LINE 3026

ATTACHMENT REDACTED IN ENTIRETY